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PTO/SB/81 (10-00)
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| | |
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| Application Number | |
| Filing Date | |
| First Named Inventor | MICHAEL SHOLANDER |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 794-001 |

I hereby appoint:

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☒ Practitioner(s) named below:

| Name | Registration Number |
|--------------------|---------------------|
| CLIFFORD G. FRAYNE | 27,637 |
| | |
| | |
| | |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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| Country | US | | | | |
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

| | |
|-----------|--------------------------|
| Name | MICHAEL SHOLANDER |
| Signature | <i>Michael Sholander</i> |
| Date | 2 Dec 03 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted
with Initial
Filing
OR
☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number 794-001

First Named Inventor MICHAEL SHOLANDER

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SURFER'S WET SUIT SKIRT/WRAP

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|--|---------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
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| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION — Utility or Design Patent Application

| | | | | |
|--|--|---|--|------------------------------|
| Direct all correspondence to: <input type="checkbox"/> | | Customer Number or Bar Code Label <input style="width: 100px;" type="text"/> | OR <input checked="" type="checkbox"/> | Correspondence address below |
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| Address 136 Drum Point Road, Suite 7A | | | | |
| City Brick | | State NJ | ZIP 08723 | |
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| <small>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</small> | | | | |
| NAME OF SOLE OR FIRST INVENTOR : | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | |
| Given Name (first and middle (if any)) MICHAEL | | Family Name or Surname SHOLANDER | | |
| Inventor's Signature <i>Michael Sholan</i> | | | Date 12.02.03 | |
| Residence: City Point Pleasant | | State NJ | Country US | Citizenship US |
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| City Point Pleasant | | State NJ | ZIP 08742 | Country US |
| NAME OF SECOND INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | |
| Given Name (first and middle (if any)) | | Family Name or Surname | | |
| Inventor's Signature | | | Date | |
| Residence: City | | State | Country | Citizenship |
| Mailing Address | | | | |
| City | | State | ZIP | Country |
| <input checked="" type="checkbox"/> Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto. | | | | |